UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. SECTION 4(6), AND/OR



SEC USE ONLY					
Prefix	Serial				
DATE RECEIVED					
Į.	- 1				

UNIFORM LIMITED OFFERING EXEMPTION

Name of Offering (check if this is an amendment and name has changed, and indicate change.) Series A Preferred Stock and Series B Preferred Stock Offering	AUFO CO
Filing Under (Check box(es) that apply): ☐ Rule 504 ☐ Rule 505 ☐ Rule 506 ☐ Section 4(6) ☐	ULOE
Type of Filing: New Filing Amendment	MAN 2 9 2004
A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer	
Name of Issuer (☐ check if this is an amendment and name has changed, and indicate change.)	(187/89)
ECapital Financial Corp.	
	Number (Including Area Codé)
11766 Wilshire Blvd., Los Angeles, CA 90025 (310) 460 Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telephone	: Number (Including Area Code)
(if different from Executive Offices) (SAME)	Hamber (metading Area Code)
Brief Description of Business Provider of retail and financial services	PROCESSED
Type of Business Organization	
☐ corporation ☐ limited partnership, already formed ☐ other (please spe	ecify): MAR 3 1 2004
□ business trust □ limited partnership, to be formed	ony). (MAIN & I LOUI
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State; foreign jurisdiction) DE	Estimated FINANCIAL CN for Canada; FN for other
GENERAL INSTRUCTIONS	
Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or or 15 U.S.C. 77d(6).	Section 4(6), 17 CFR 230.501 et seq.
When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the at that address after the date on which it is due, on the date it was mailed by United States registered or certification.	e address given below or, if received
Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C.	20549.
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually sign must be photocopies of the manually signed copy or bear typed or printed signatures.	ned. Any copies not manually signed
Information Required: A new filing must contain all information requested. Amendments need only report any changes thereto, the information requested in Part C, and any material changes from the information B. Part E and the Appendix need not be filed with the SEC.	
Filing Fee: There is no federal filing fee.	
State:	
This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for so have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the proper amount shall accompany this form. This notice shall be filed in the appropriate states in Appendix to the notice constitutes a part of this notice and must be completed.	h the Securities Administrator in each the claim for the exemp-tion, a fee in
ATTENTION	
Failure to file notice in the appropriate states will not result in a loss of the federal exemption. appropriate federal notice will not result in a loss of an available state exemption unless such	

the filing of a federal notice.

A. BASIC IDENTIFICATION DATA 2. Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; • Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer □ Director General and/or Managing Partner Full Name (Last name first, if individual) Drori, Ron Business or Residence Address (Number and Street, City, State, Zip Code) 11766 Wilshire Blvd., Los Angeles, CA 90025 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Malina, Robert Business or Residence Address (Number and Street, City, State, Zip Code) 11766 Wilshire Blvd., Los Angeles, CA 90025 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer □ Director П General and/or Managing Partner Full Name (Last name first, if individual) Kruttschnitt, Theodore H. (Number and Street, City, State, Zip Code) Business or Residence Address 11766 Wilshire Blvd., Los Angeles, CA 90025 Check Box(es) that Apply: Executive Officer Director General and/or ☐ Promoter ☐ Beneficial Owner Managing Partner Full Name (Last name first, if individual) Mehta, Shailesh Business or Residence Address (Number and Street, City, State, Zip Code) 11766 Wilshire Blvd., Los Angeles, CA 90025 Check Box(es) that Apply: ☐ Beneficial Owner ☐ Executive Officer □ Director General and/or Promoter Managing Partner Full Name (Last name first, if individual) Hakman, David Business or Residence Address (Number and Street, City, State, Zip Code) 11766 Wilshire Blvd., Los Angeles, CA 90025 □ Director Check Box(es) that Apply: ☐ Executive Officer ☐ General and/or Promoter ☐ Beneficial Owner Managing Partner Full Name (Last name first, if individual) Rush, Herman Business or Residence Address (Number and Street, City, State, Zip Code 11766 Wilshire Blvd., Los Angeles, CA 90025 Check Box(es) that Apply: ☐ Executive Officer □ Director General and/or ☐ Promoter ☐ Beneficial Owner Managing Partner Full Name (Last name first, if individual) Adlam, Boris Business or Residence Address (Number and Street, City, State, Zip Code) 11766 Wilshire Blvd., Los Angeles, CA 90025 □ Director Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner Executive Officer ☐ General and/or Managing Partner Full Name (Last name first, if individual) Kano, Karim Business or Residence Address (Number and Street, City, State, Zip Code) 11766 Wilshire Blvd., Los Angeles, CA 90025

Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☑ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual) G	rant, Dan			
Business or Residence Addre	ess (Number	and Street, City, State, Z	(ip Code)		
11766 Wilshire Blvd., Los	Angeles, CA 90	025			
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	Director	☐ General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Business or Residence Addre	ess (Number	and Street, City, State, Z	(ip Code)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	☐ General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Business or Residence Addre	ess (Number	and Street, City, State, Z	(ip Code)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	☐ Executive Officer	Director	☐ General and/or Managing Partner
Full Name (Last name first,	if individual)				
Business or Residence Addre	ess (Number	and Street, City, State, Z	Cip Code)		
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	Director	☐ General and/or Managing Partner
Full Name (Last name first,	if individual)				
Business or Residence Address	ess (Number	and Street, City, State, Z	(ip Code)		
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Business or Residence Addr	ess (Number	and Street, City, State, Z	Cip Code)		
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first,	if individual)				
Business or Residence Address	ess (Number	and Street, City, State, Z	Cip Code)		
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	☐ General and/or Managing Partner
Full Name (Last name first,	if individual)				
Business or Residence Addr	ess (Number	and Street, City, State, Z	Cip Code)		

					B. INF	ORMATI	ON ABO	UT OFFE	RING				
											-		Yes No
1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?							🔲 🔯						
Answer also in Appendix, Column 2, if filing under ULOE. 2. What is the minimum investment that will be accepted from any individual?							****						
2. Wha	at is the m	inimum ir	ivestment	that will b	e accepted	l from any	individua	al?		•••••	•••••		
3 Doe	s the offer	ring nermi	t ioint ow	nership of	`a single u	nit?						• • • • • • • • • • • • • • • • • • • •	Yes No ⊠ □
			-	-	_			paid or gi					23 (
	sion or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker												
					for that be				re associa	itea perso	ns of such	a broker	
			if individ		Hakman,					- · · · ·			
Busines	s or Resid	lence Add	ress (Num	ber and S	treet, City,	State, Zit	Code)	1350 Ba	shore Hi	ghway, S	uite 300, 1	Burlingame	, CA 94010
			`				,	•		•	,	· ·	,
Name o	f Associat	ed Broker	or Dealer	H	akman &	Company	Incorpo	rated					
States in	n Which F	erson List	ted Has So	licited or	Intends to	Solicit Pu	ırchasers						
(Ch	ook "A11 S	itotos" or a	sheek indi	vidual Sta	tacl							г	All States
				AMPLE COLOR									All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	(CT)	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]	
[IL] [MT]	[IN] [NE]	[IA] [NV]	[KS] [NH]	[KY] [NJ]	[LA] [NM]	[ME] [NY]	[MD] [NC]	[MA] [ND]	[MI] [OH]	[MN] [OK]	[MS] [OR]	[MO] [PA]	
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]	
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Busines	s or Resid	lence Add	ress (Num	ber and S	treet, City,	State, Zin	Code)						
			•			•							
Name o	f Associat	ted Broker	or Dealer	•									
States in	n Which F	erson Lis	ted Has So	olicited or	Intends to	Solicit Pu	ırchasers						
													All States
													An States
[AL]					[CO]		[DE]	[DC]	[FL]	[GA]	[HI]	[ID]	
[IL] [MT]	[IN] [NE]	[IA] [NV]	[KS] [NH]	[KY] [NJ]	[LA] [NM]	[ME] [NY]	[MD] [NC]	[MA] [ND]	[MI] [OH]	[MN] [OK]	[MS] [OR]	[MO] [PA]	
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]	
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	•												
Busines	s or Resid	ience Add	ress (Num	ber and S	treet, City	State, Zi	Code)						
						•							
Name o	of Associa	ted Broker	r or Dealer	•									
_													
States i	n Which F	Person Lis	ted Has So	olicited or	Intends to	Solicit P	urchasers						
													All States
,					*								All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]	
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נסנו [אנו]	[AC]	16D) [14A]	נואדון	[IV]	נואואון נידוו	(VT)	[NC]	DVAI	(OH)	(WII)	(WV)	נססו ומסו	

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amou already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchan offering, check this box \square and indicate in the columns below the amounts of the securiti offered for exchange and already exchanged.	ge			
	Type of Security		Aggregate Offering Price	An	nount Already Sold
	Debt	\$	0	\$	O
	Equity	\$	9,366,209	\$	9,366,209
	Common Preferred	Ψ		Ψ	>, 500,2 0>
	Convertible Securities (including warrants)	\$	0	\$	0
	Partnership Interests	\$	0	\$	0
	Other (Specify)	\$	0	\$	C
	Total	\$	9,366,209	\$	9,366,209
	Answer also in Appendix, Column 3, if filing under ULOE		, ,		, ,
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings und Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases of the total lines. Enter "0" if answer is "none" or "zero.	der ate			
	Investors		Number of Purchasers	D	Aggregate ollar Amount
	Accredited Investors		19	\$	9,366,209
	Non-accredited Investors		0	\$,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	Total (for filings under Rule 504 only)		V	J	
	Answer also in Appendix, Column 4, if filing under ULOE				
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (1 months prior to the first sale of securities in this offering. Classify securities by type list in Part C - Question 1.	(2)			
	Type of Offering		Type of Security	D	ollar Amount Sold
	Rule 505		Security	•	Solu
	Regulation AN/A			⊅_ \$	<u>. </u>
	Rule 504N/A			\$	
	Total			\$_	
t	a. Furnish a statement of all expenses in connection with the issuance and distribution the securities in this offering. Excluded amounts relating solely to organization expenses the issuer. The information may be given as subject to future contingencies. If the amou of an expenditure is not known, furnish an estimate and check the box to the left of t estimate.	of int			
	Transfer Agent's Fee]\$
	Printing and Engraving Costs		••••••]\$
	Legal Fees		***************************************	\boxtimes]\$80,000
	Accounting Fees]\$
	Engineering Fees]\$
	Sales Commissions (specify finders' fees separately)		•••••]\$80,000
	Other Expenses (identify):]\$
	Other Expenses (identify)]\$
	Total			IZ.	75160,000

Other Expenses (identify)			□ \$
_			⊠\$160,000
C. OFFERIN	G PRICE, NUMBER OF INVESTORS, EXPENSES	AND USE OF PROCEE	os
 b. Enter the difference betwee Question 1 and total expense difference is the "adjusted gross 5. Indicate below the amount of the 	s 	\$9,206,209	
be used for each of the purpose furnish an estimate and check	es shown. If the amount for any purpose is not known the box to the left of the estimate. The total of the indjusted gross proceeds to the issuer set forth in response	ı, e	
		Payment to Officers, Directors, &	Payments To
Salarias and face		Affiliates	Others
			П s
	nd installation of machinery and equipment		□ \$
,	lant buildings and facilities		
•	s (including the value of securities involved in		
this offering that may be use	ed in exchange for the assets or securities or	□ ¢	
•	n merger)		□ \$
- ·			□ \$
			\$9,206,209
Other (specify):		🗆 \$	L 8
· · · · · · · · · · · · · · · · · · ·		 \$	
			□ \$ ⊠ \$9,206,209
	mn totals added)		
Total Payments Listed (Cold	mir totals added)	••••••	\$ 9,200,209
	D. FEDERAL SIGNATURE		
ollowing signature constitutes an unde	to be signed by the undersigned duly authorized person. In taking by the issuer to furnish to the U.S. Securities a shed by the issuer to any non-accredited investor pursuan	nd Exchange Commission	, upon written
ssuer (Print or Type)	Signature	Date:	
Capital Financial Corp.	- Carl	3-24-04	
Name of Signer (Print or Type)	Title of Signer (Print or Type)		
Ron Drori	President		